Post Office Box 4368 Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (for candidates)

This Report Covers Calendar Year: 2020	
 ☑ORIGINAL REPORT ☐ AMENDED REPORT ☐ I currently hold an office that would require me to file a Tier 2.1, or T Statement. As such, I have completed SCHEDULE D. 	lier 3 Personal Financial Disclosure
Office Sought: Bossier City Councilman At Large	— Incumbent:⊠ Yes □ No
Date of Election: 3/20/2021	
NAME OF FILER (print full name): David A. Montgomery, Jr.	
Mailing Address: 44 Duck Haven Pt.	
City, State, Zip: Bossler City, LA, 71111	
NAME OF SPOUSE(if applicable)(print full name): Lisa T. Montgor Spouse's Occupation: Abstractor	mery
Spouse's Principal Business Address: 333 Texas Street, Suite 700	
City, State, Zip: Shreveport, LA, 71101	
CHECK ALL THAT APPLY I have filed my state income tax return for the previous year. I have filed for an extension of my state income tax return for the previous year. I have filed my federal income tax return for the previous year.	rious year.
☐ I have filed for an extension of my federal income tax return for the pr	
NOTE: La. R.S. 18:1495.7 and 42:1124.2 does not provide candidates the oppopersonal financial disclosure statements.	
I am a candidate in an election to be held prior to April 15 and I have a previous year.	not filed my tax return for the

CERTIFICATE OF ACCURACY

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

Signature of Filer

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Schedule A: Employment Information

Spouse Spull-Time Part-Time	Check if not applicable		
Job Title: Co-Owner Job Description: Insurance Sales Filer Spouse Full-Time Part-Time	⊠Filer □Spouse		÷
Job Title: Co-Owner Job Description: Insurance Sales Filer Spouse Full-Time Part-Time Name of Employer: Blanchard, Walker, O'quin & Robert Job Title: Abstractor Job Description: Title Search Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Job Description: Job Title: Job Title:	Name of Employer: Montgome	ry Agency	
Filer Spouse Sfull-Time Part-Time Name of Employer: Blanchard, Walker, O'quin & Robert Job Title: Abstractor Job Description: Title Search Filer Spouse Full-Time Part-Time Name of Employer: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Description: Job Description: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: Job Title: J	Job Title: Co-Owner		
Filer Spouse Sfull-Time Part-Time Name of Employer: Blanchard, Walker, O'quin & Robert Job Title: Abstractor Job Description: Title Search Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Job Title: Job Title: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job	<u>.</u> .		
Name of Employer: Blanchard, Walker, O'quin & Robert Job Title: Abstractor Job Description: Title Search Filer Spouse Full-Time Part-Time	Job Description: Insurar	nce Sales	
Job Title: Abstractor Job Description: Title Search Filer Spouse Full-Time Part-Time Name of Employer:	□Filer ⊠Spouse		
Job Description: Title Search	Name of Employer: Blanchard,	Walker, O'quin & Robert	
Filer Spouse Full-Time Part-Time Name of Employer:	Job Title: Abstractor		
□Filer □Spouse □Full-Time □Part-Time Name of Employer: □Job Title: □Filer □Spouse □Full-Time □Part-Time Name of Employer: □Job Title: □Job Description: □Full-Time □Part-Time □Filer □Spouse □Full-Time □Part-Time Name of Employer: □Job Title: □Part-Time			
Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Title:	Job Description: Title Se	earch	
Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title:	□Filer □Spouse	☐Full-Time ☐Part-Time	
Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title:	Name of Employer:		
Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Description: Filer Spouse Full-Time Part-Time Name of Employer: Job Title:	Job Title:		
□Filer □Spouse □Full-Time □Part-Time Name of Employer:			
Name of Employer:	Job Description:		
Job Title:	□Filer □Spouse	☐Full-Time ☐Part-Time	
Job Title:	Name of Employer:		
□Filer □Spouse □Full-Time □Part-Time Name of Employer: Job Title:			
□Filer □Spouse □Full-Time □Part-Time Name of Employer: Job Title:			
Name of Employer: Job Title:	Job Description:		
Job Title:	□Filer □Spouse	☐Full-Time ☐Part-Time	
Job Title:	Name of Employer:		and a side of the
	1		
	Joh Description		

- * You are required to disclose employment information related to both you and your spouse (if applicable).
- * List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.
- * Self-employment information is reported on Schedule B.

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Schedule B: Positions - Business

☐ Check if not applicable	
⊠Filer □Spouse □Both	
Amount of Interest: 50 %	
Name of Business: Montgomery Agency, Inc.	
Address: 1913 Citizens Bank Drive	
City, State, Zip: Bossier City, LA, 71112	
Business Description: Insurance Agency	
Nature of Association: Shareholder 50% and Employee	
⊠Filer □Spouse □Both	
Amount of Interest: 50 %	
Name of Business: Brothers Venture	
Address: 44 Duck Haven Pt.	
City, State, Zip: Bossier City, LA, 71111	
Business Description: Real Estate	
Nature of Association: 50% Owner - Member	
⊠Filer □Spouse □Both	
Amount of Interest: 100 %	
Name of Business: David A. Montgomery , Jr. Insurance	
Address: 44 Duck Haven Pt.	
City, State, Zip: Bossier City, LA, 71111	
Business Description: Insurance Sales and Brokerage	
Nature of Association: Sole Proprietorship - Owner 100%	

- * You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.
- * "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule C: Positions - Nonprofit

☐ Check if not applicable

□Filer □Spouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
Filer Spouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
Filer Spouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:

^{*}You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

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Schedule D: Other Offices/Positions Held

⊠ Check if not applicable	
Name of Office/Position:	
Name of Office/Position:	
N COCC ID III	
Name of Office/Position:	
Name of Office/Position:	
,	
Name of Office/Position:	
Hame of office, I obtain	
Name of Office/Position:	
Name of Office/Position:	
Name of Office/Position:	
Traine of Office/1 obtains	
1	

* You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.

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Schedule E: Immovable Property

☐ Check if	not applicable (where the value of the	e interest in the parcel exceeds \$2,000)
⊠Filer	□Spouse □Both	
Location o	of Property:	
State:	Louisiana	Parish/County: Bossier
Descrip	otion of Property: 4 Acres Real Estat	e 1761 Swan Lake RoadBossier City, LA 71111
Value of th	ne Interest in the Parcel:	
	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)
⊠Filer	□Spouse □Both	
Location of	of Property:	
State:	Louisiana	Parish/County: Bossier
Descrip	otion of Property: Office Building 19	13 Citizens Bank DriveBossier City, LA 71111
Value of tl	he Interest in the Parcel:	
	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)
⊠Filer	□Spouse □Both	
Location of	of Property:	
State:	Louisiana	Parish/County: Bossier
Descri	otion of Property: Residence44 Duc	k Haven Pt.Bossier City, LA 71111
1 -	he Interest in the Parcel:	
	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)
	Category III (\$25,000-\$100,000)	☐ Category IV (more than \$100,000)

^{*} You are required to disclose the location by state and parish/county.

^{*} You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)

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⊠Filer □Spouse □Business(where amount of interest exceeds 10%)	
Type of Income: □State ☑Political Subdivision □ Gaming Interest	
Name of Business(if applicable): Montgomery Agency, Inc.	
Name of Income Source: Bossier Parish Police Jury	
Address: 204 Burt Blvd	
City, State, Zip: Benton, LA, 71006	
Amount of Income (exact dollar amount): \$ 100,387.00	
Type of Income: ☐State ☑Political Subdivision ☐ Gaming Interest	
Name of Business(if applicable): Montgomery Agency, Inc.	
Name of Income Source: Caddo-Bossier Port Commission	
Address: 10397 Highway 1	
City, State, Zip: Shreveport, LA, 71115	
Amount of Income (exact dollar amount): \$ 46,238.00	
☑ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)	
Type of Income: □State ☑Political Subdivision □ Gaming Interest	
Name of Business (if applicable): David A. Montgomery, Jr. Insurance	
Name of Income Source: Caddo-Bossier Port Commission	
Address: 10397 Highway 1	
City, State, Zip: Shreveport, LA, 71115	
Amount of Income (exact dollar amount): \$ 13,494.00	

- * You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.
- * "Income" (for a business) means gross income less costs of goods sold, and operating expenses.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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Filer Spouse Business(where amount of interest exceeds 10%)
ype of Income: State Political Subdivision Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: Cons Waterworks/Sewerage District No. 1 Bossier
Address: 204 Burt Blvd
City, State, Zip: Benton, LA, 71006
Amount of Income (exact dollar amount): \$ 14,211.00
☑Filer ☐Spouse ☐Business(where amount of interest exceeds 10%)
ype of Income: State Political Subdivision Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: Bossier Parish Sheriff
Address: 204 Burt Blvd
City, State, Zip: Benton, LA, 71006
Amount of Income (exact dollar amount): \$ 79,977.00
☑Filer ☐Spouse ☐Business(where amount of interest exceeds 10%)
Type of Income: □State ☑Political Subdivision □ Gaming Interest
Name of Business(if applicable):
Name of Income Source: City of Bossier City - W-2 Councilman
Address: 620 Benton Rd
City, State, Zip: Bossier City, LA, 71111
Amount of Income (exact dollar amount): \$ 10,710.00

- * You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.
- * "Income" (for a business) means gross income less costs of goods sold, and operating expenses.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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Type of Income: □State ⊠Political Subdivision □ Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: 26th JDC Drug Court
Address: 3022 Old Minden Rd, Suite 218
City, State, Zip: Bossier City, LA, 71111
Amount of Income (exact dollar amount): \$ 2,737.00
☐ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)
Type of Income: □State ☑Political Subdivision □ Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: Sport-Bossier Convention & Tourist Bureau
Address: P.O. Box 1761
City, State, Zip: Shreveport, LA, 71166
Amount of Income (exact dollar amount): \$ 11,262.00
Type of Income: □State ⊠Political Subdivision □ Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: 26th Judicial District Court
Address: 1204 Burt Blvd
City, State, Zip: Benton, LA, 71006
Amount of Income (exact dollar amount): \$ 1,874.00

- * You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.
- * "Income" (for a business) means gross income less costs of goods sold, and operating expenses.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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Type of Income: ☐State ☑Political Subdivision ☐ Gaming Interest
Name of Business(if applicable): Montgomery Agency, Inc.
Name of Income Source: Cypress Black Bayou Rec & Water Cons District
Address: 135 Cypress Park Drive
City, State, Zip: Benton, LA, 71006
Amount of Income (exact dollar amount): \$ 11,019.00
☐Filer ☐Spouse ☐Business(where amount of interest exceeds 10%)
Type of Income: ☐State ☐Political Subdivision ☐ Gaming Interest
Name of Business(if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$
☐Filer ☐Spouse ☐Business(where amount of interest exceeds 10%)
Type of Income: ☐State ☐Political Subdivision ☐ Gaming Interest
Name of Business(if applicable):
Name of Income Source:
Address:
City, State, Zip:
Amount of Income (exact dollar amount): \$

- * You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.
- * "Income" (for a business) means gross income less costs of goods sold, and operating expenses.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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Schedule G: Income Received from Employment

☐ Check if not applicab	ole		
⊠Filer □Spouse ⊠Full-time □Part-time			
Name of Employer:	Montgomery Agency, Inc.		
Address: 1913	Citizens Bank Drive		
City, State, Zip	Bossier City, LA, 71111		
Nature of services (p	oursuant to such employment): Insurance Sales - Co-Owner	
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	
□Filer ⊠Spouse ⊠Full-time □Part-time			
Name of Employer:	Blanchard, Walker, O'quin & Robert		
Address: 333	Texas Street, Suite 700		
City, State, Zip	Shreveport, LA, 71101		
Nature of services (p	Nature of services (pursuant to such employment): Title Search		
	_		
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	☐ Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	
□Filer □Spouse □Full-time □Part-time			
Name of Employer:			
Address:			
City, State, Zip:			
Nature of services (pursuant to such employment):			
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	

* Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.

* Income received through self-employment is reported on SCHEDULE H, unless it is reported on Schedule F.

^{*} You are required to complete SCHEDULE G to disclose the income received by you or your spouse for each full-time or part-time employment position held.

^{* &}quot;Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

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Schedule H: Income Received From Business

Check if not applicable
AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS:
Category I (less than \$5,000) Category II (\$5,000-\$24,999)
Category III (\$25,000-\$100,000)
⊠Filer □Spouse
Name of Business: Brothers Venture
Address: 44 Duck Haven Pt.
City, State, Zip: Bossier City, LA, 71111
Nature of services rendered or reason income was received: Real Estate
⊠Filer □Spouse
Name of Business: David A. Montgomery , Jr. Insurance
Address: 44 Duck Haven Pt.
City, State, Zip: Bossier City, LA, 71111
Nature of services rendered or reason income was received: Insurance Sales & Brokerage
⊠Filer □Spouse
Name of Business: Business First Bank
Address: 500 Laurel Street , Suite 101
City, State, Zip: Baton Rouge, LA, 70801
Nature of services rendered or reason income was received: Member Board of Directore
⊠Filer □Spouse
Name of Business: Montgomery Agency, Inc.
Address: 1913 Citizens Bank Drive
City, State, Zip: Bossier City, LA, 71111
Nature of services rendered or reason income was received: Insurance Sales

- * You are required to complete SCHEDULE H if you or your spouse received income from a business.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * Income reported on SCHEDULE F or G does not have to be restated on SCHEDULE H.
- * Income received through self-employment is reported on SCHEDULE H.
- * "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule I: Other Income (any other income that exceeds \$1,000)

Check if not applicable

⊠Filer □Spouse			
Description of Income:			
Interest and Dividends from Investments			
Nature of services render	red or reason income was rec	eived:	
Investment Income			
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	
□Filer □Spouse			
Description of Income:			
Nature of services rendered or reason income was received:			
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	
□Filer □Spouse			
Description of Income:			
Nature of services rendered or reason income was received:			
Amount of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)	

- * You are required to complete SCHEDULE I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * You are not required to report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.
- * Income from retirement accounts not reported on Schedule F should be included on Schedule I.

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Schedule J: Investment Holdings

Check if not applicable (an investment notding that exceeds \$5,000)
⊠Filer □Spouse □Both
Name of Security:
Business First Bank
Description of Security:
7000 Shares Common Stock
⊠Filer □Spouse □Both
Name of Security:
Montgomery Agency, Inc.
Description of Security:
48 Shares Common Stock
⊠Filer □Spouse □Both
Name of Security:
Miami Holdings
Description of Security:
7200 Shares Common stock

* You are required to complete SCHEDULE J if you or your spouse holds investment securities where each investment security has a value that exceeds \$5,000.

* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.

* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

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Schedule K: Transactions

☐ Check if not applicable (a transaction that exceeds \$5,000)				
⊠Filer □Spouse □Both				
Transaction Date: 11/10/2020				
Description of Transaction:				
Sale of Residence 130 Stonebridge Blvd.Bossier City, LA 71111				
Amount of Transaction: Category I (less than \$5,000)	Category II (\$5,000-\$24,999)			
Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)			
□Filer ⊠Spouse □Both				
Transaction Date: 2/28/2020				
Description of Transaction:				
Sale of Residence34 Waterbury Dr.Bossier City, LA 71111				
Amount of Transaction: Category I (less than \$5,000) Category II (\$5,000-\$24,999)				
Category III (\$25,000-\$100,000)	☐ Category IV (more than \$100,000)			
□Filer □Spouse □Both				
Transaction Date:				
Description of Transaction:				
Amount of Transaction: Category I (less than \$5,000)	Category II (\$5,000-\$24,999)			
Category III (\$25,000-\$100,000)	Category IV (more than \$100,000)			

- * You are required to complete SCHEDULE K if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (when the value of the transaction exceeded \$5,000 in the previous calendar year).
- * You are not required to report variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, cash or cash equivalent investments.

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Schedule L: Liabilities

(a liability that exceeds \$10,000) ☐Filer ☐Spouse Name of Creditor: Address: City, State, Zip: Name of Guarantor (If applicable): □Filer □Spouse Name of Creditor: Address: City, State, Zip: Name of Guarantor (If applicable): ☐Filer ☐Spouse Name of Creditor: Address: City, State, Zip: Name of Guarantor (If applicable): □Filer □Spouse Name of Creditor: Address: City, State, Zip:

Name of Guarantor (If applicable):

^{*}You are required to complete SCHEDULE L if you or your spouse owes any liability which exceeds \$10,000 on the last day of the reporting period.

^{*}You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

^{*}You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

^{*}You are not required to disclose any loan by a licensed financial institution which loans money in the ordinary course of business.

^{*} You are not required to disclose any liability resulting from a consumer credit transaction as defined in R.S. 9:3516(13).

^{*}You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

^{*&}quot;Consumer Credit Transaction" in R.S. 9:3516(13) means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made pursuant to R.S. 6:969.1 et seq.